



# CITY OF ELIZABETHTON

## Building Department

### Sign Permit Application Packet

Sign Location Address: \_\_\_\_\_ Zoning: \_\_\_\_\_

#### **Application Checklist**

**- ITEMS BELOW MUST BE INCLUDED WITH APPLICATION SUBMITTAL -**

##### **All Signs:**

- Scale Drawing of all signs and site plans with all set back information
- Completed Dimension Calculations for all signs
- Square footage of all existing signs
- Copy of invoice for total cost of sign and installation
- Drawing, digital image, or picture of the sign to be displayed

##### **Freestanding Sign Documentation: (new or modified)**

- Scale site plan for freestanding and ground signs (with property lines)
- Windload calculations for freestanding signs (P.E. stamped)
- Scale engineering drawings of freestanding sign footers (P.E. stamped)

##### **Wall Sign Documentation: (new or modified)**

- Scale elevation drawing of wall signs

#### **Sign Permit Applicant:**

Applicant Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

#### **Sign Contractor:**

Sign Contractor Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**Property Owner Information:**

Property Owner(s) Name(s): \_\_\_\_\_

Street Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Sign Information: (check only one for each section)**

<input type="checkbox"/> New	<input type="checkbox"/> Reface	<input type="checkbox"/> Both new and refacing (distinguish between each type)
<input type="checkbox"/> Building Mounted	<input type="checkbox"/> Ground Mounted	
<input type="checkbox"/> Individual Letters	<input type="checkbox"/> Box	<input type="checkbox"/> Board
<input type="checkbox"/> Projecting from building	<input type="checkbox"/> Flat against wall or window	
<input type="checkbox"/> Freestanding	<input type="checkbox"/> Hanging in Window	
<input type="checkbox"/> Painted on wall or window		
<input type="checkbox"/> Side of building	<input type="checkbox"/> Front of building	<input type="checkbox"/> Rear of building
<input type="checkbox"/> Backlit	<input type="checkbox"/> External illumination	<input type="checkbox"/> Neon <input type="checkbox"/> Non-illuminated

**Sign Calculations and Dimensions: (show all calculations below in decimal format)**

**Single Faced Wall Sign Dimensions**

	Feet	Inches	Decimal	Total
Height				
Width				
Total Sq. Feet:				

Total Length of Displayed Building Wall Face: \_\_\_\_\_ feet

**Freestanding/Ground Sign Dimensions (reader boards and all sections)**

Total height of sign from peak to grade: \_\_\_\_\_ feet  Freestanding Sign  Ground Sign

Distance of sign from property line: front: \_\_\_\_\_ side: \_\_\_\_\_

**Face 1**

	Feet	Inches	Decimal	Total
Height				
Width				
Total Sq. Feet:				

**Face 2**

	Feet	Inches	Decimal	Total
Height				
Width				
Total Sq Feet:				

Total Square Footage of All Freestanding/Ground Sign Faces: \_\_\_\_\_ sq ft

Total New Signage: \_\_\_\_\_

Total Existing Signage: \_\_\_\_\_

Freestanding: \_\_\_\_\_

Wall, other: \_\_\_\_\_

Existing to be Removed: \_\_\_\_\_

Freestanding: \_\_\_\_\_

Wall, other: \_\_\_\_\_

Overall Signage Total: \_\_\_\_\_ (calculate to show as less any to be removed)

Total sign cost: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Signature

----- **FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE** -----

Date Submitted: \_\_\_\_\_ File No. \_\_\_\_\_ Fee Paid: \_\_\_\_\_

Planning Approval:

\_\_\_\_\_  
Planning Approval Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Comments: